

WASHINGTON STATE LEGISLATIVE ETHICS BOARD

ETHICS COMPLAINT FORM

When you have completed this form, mail it to:

Legislative Ethics Board
Attention: Mike O'Connell
PO Box 40482
Olympia, WA 98504-0482

Mark your envelope “confidential.”

1. Identify the person alleged to have violated the state ethics law (Chapter 42.52 RCW) and provide the following information, if known:

Name: _____

Position/title: _____

2. Explain why you believe that the individual named above may have violated the state ethics law. Be as specific as possible as to dates, times, places, and acts. Attach additional sheets of paper if this space is not sufficient.

[illegible]

3. Attach or make reference to any documents or other evidence that support your allegations. Also list the names and addresses of any witnesses or persons having knowledge of facts that support your allegations.

I certify and swear, under oath, that the facts set forth in this statement are true and correct to the best of my knowledge, information, and belief.

*RCW 9A.72.040 provides that: “(1) A person is guilty of false swearing if he makes a false statement, which he knows to be false, under an oath required or authorized by law. (2) False swearing is a misdemeanor.”

Your signature

Signature of attorney (if any)

Your printed name

Attorney's printed name

Street address

Street address

City, state and zip code

City, state and zip code

Telephone number

Telephone number

Date

Date